

PSR Request for Voter Registration Data

Name (Print): _____

Address: _____

City, State & Zip: _____

Telephone Number: _____

Email Address: _____

Please include detailed description of your request for voter registration data and what it is to be used for:

Format	Cost			+	Time Spent	+	Research Fee		=	Total Amt. Due
	Letter/Legal = \$.10/pg.	X	# of pages = _____				Average hourly pay for clerical staff = _____	_____		
Copies	Letter/Legal = \$.10/pg.	X	# of pages = _____	+	_____	X	Average hourly pay for clerical staff = _____	_____	=	_____
CD or other media	Cost of media = _____	X	quantity = _____	+	_____	X	Labor = _____	_____	=	_____
Voter Address Labels	Cost of sheet = _____	X	quantity = _____	+	_____	X	Actual cost of research time = _____	_____	=	_____

NOTICE OF APPROPRIATE USE

****MUST READ & SIGN BEFORE REQUEST IS VALID****

Section 115.158 RSMo prohibits commercial use of Centralized Voter Registration System Information. The statute states: "...Any information contained in any state or local voter registration system, limited to the master voter registration list or any other list generated from the information, subject to chapter 610, RSMo, shall not be used for commercial purposes; provided, however, that the information may be used for elections, for candidates, or for ballot measures, furnished at a reasonable fee. Violation of this section shall be a class B misdemeanor." "Commercial purposes" means the use of a public record for the purpose of sale or resale or for the purpose of producing a document containing all or part of the copy, printout, or photograph for sale or the obtaining of names and addresses from public records for the purpose of solicitation or the sale of names and addresses to another for the purpose of solicitation or for any purpose in which the purchaser can reasonably anticipate the receipt of monetary gain from the direct or indirect use of the public record.

By your signature below, you represent that you will not use, nor will you knowingly or negligently permit others to use this information for commercial purposes.

Signature

Date

Request taken by: _____ Deputy Clerk.

Date Paid: _____ Amount Pd.: _____ How Pd.: Check/Cash _____ Recvd. By: _____